'Ethically Problematic': Pfizer Failed to Tell Pregnant Women in RSV Vaccine Trial About Preterm Birth Risk

According to an investigation by The BMJ, when GlaxoSmithKline halted its RSV vaccine trial for pregnant women in 2014 because of a higher risk of premature births, Pfizer launched a similar trial, Pfizer's lack of transparency as an ethical violation compromising informed consent.

By John Michael Dumais

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When Pfizer conducted a large clinical trial to test a new respiratory syncytial virus (RSV) vaccine for pregnant women, it failed to inform participants that the pharmaceutical giant had halted a similar trial pertaining to the GlaxoSmithKline Biologicals (GSK) trial halted in mid-trial for a similar vaccine due to a concerning safety signal showing a potential risk of preterm birth.

Even though Pfizer knew about the GSK trial and safety signal, it continued enrolling thousands of unsuspecting pregnant women in its vaccine trial, leading to preterm birth risk in its consent forms, according to an investigation by The BMJ.

The study's investigators said Pfizer's omission constitutes an egregious violation of informed consent and a disregard for the autonomy of pregnant women participating in the Pfizer trial.

"Any failure to provide new and potentially important safety information due to trial participants is ethically problematic," Dr. Peter Doshi, associate professor at Western University of Health Sciences, told The BMJ.

Children's Health Defense CEO Mary Holland told The Defender:

"I am horrified that it's even a question whether Pfizer should have told pregnant women participating in its RSV vaccine trial about a similar trial that GlaxoSmithKline had halted because of safety concerns. It's a no-brainer.

"The standard must be, 'What would a reasonable pregnant woman want to know about the potential risks of this drug or vaccine before she decides she wants to know if it causes preterm birth. This coauthor attitude towards the truth and humanity is abhorrent."

After the safety signals emerged in GSK's study, the U.S. Food and Drug Administration (FDA) placed a clinical hold on both trials and issued a request to Pfizer's ongoing maternal RSV vaccine trial.

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'Statistically significant' shouldn't form sole basis of Pfizer's decision

Months after GSK's termination of the company's trial, Pfizer began conducting a numerical imbalance in preterm births in its own trial data but said the data were not statistically significant.

According to The BMJ, Pfizer was tracking preterm births as an "adverse event of special interest" in its trial. But the company did not disclose the results or forms given to thousands of pregnant trial participants across 18 countries.

"Since the results of the GSK trial are premature births become public, this is a serious violation of pregnant women's rights to have submitted to include this information," Dr. Meryl Nass, MD, a member of the Physicians and Maternal Virology at the University Hospital Erasmus, in The BMJ report.

However, regulators took little action to encourage disclosure. The FDA ultimately instituted Pfizer's vaccine's late pregnancy — specifically, for administration between 32 36 weeks only — due to preterm concerns. But the FDA did not require any clinical trial enrollment or have Pfizer disclose what the GSK findings emerged.

Some defend Pfizer's lack of disclosure to trial participants by arguing the problem is not new. Researcher Dr. Jorg von Gartner, who is also in the Netherlands, told The BMJ that informing women "would have caused too much uncertainty."

However, others challenged this notion. "The renewal of informed consent is a must," Rose Berube, Ph.D., told The BMJ.

Berube, a professor of medical research ethics at the University of South Eastern Norway, referenced guidelines from the Council for International Organizations of Medical Sciences, which state: "Researchers must renew the informed consent process if new information becomes available that could affect the willingness of participants to continue."

Meiyer Vaid The BMJ:

"For Pfizer, the [GSK] [Data Safety and Monitoring Board] should have immediately informed the [Pfizer] [DSMB] of the GSK results and whether the GSK results affected that balance. They should not have their decision simply on whether a particular result is 'statistically significant.' These are difficult decisions, and a study DSMB is independent of the company."

Pfizer, GSK and the European director of campaign research for Reform Pharma, said:

"It's no surprise that regulatory agencies such as the FDA are prioritizing Big Pharma's profit over the health interests of its pregnant trial participants when you pull back the curtain and expose the revolving door between government corporate interests and pharmaceutical companies," Berube said. The industry that FDA is supposed to be regulating.

"In fact, the revolving door has become so commonplace that it is hard to decipher the tangled mess between the private sector and governmental agencies.

"For instance, a former deputy director at the FDA who ran the Office of Vaccines Research and Review is now the director of Pfizer's RSV vaccines now works for Moderna as the head of the Infectious Diseases Early Clinical Development and Translational Medicine Program.

"For the sake of public health, such egregious conflicts of interests must end."

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'I think it needs to be addressed'

According to The BMJ investigation, in February 2022, GSK reported that a safety signal had emerged in its maternal RSV trial. The BMJ found that a numerical imbalance in preterm births between the vaccine and placebo groups.

Specifically, GSK observed that 6.0% of 6 births in the vaccine arm were preterm, compared to just 4.09% of births in the placebo arm. Additionally, neonatal deaths were 0.27% in the vaccine group versus 0.17% in the placebo group.

This unexpected safety signal prompted GSK to immediately halt its Phase 3 trial and discontinue the development of its vaccine.

However, Pfizer's trial of a similar maternal RSV vaccine continued enrolling participants.

Both companies were developing versions of an RSV F protein vaccine that works by targeting the RSV fusion protein to generate antibodies that can neutralize the virus. The F protein is essential for viral entry and its structure is highly consistent across different strains of RSV.

As Pfizer's Phase 3 data, 5.7% of births in the vaccine arm were preterm compared to just 4.7% in placebo. Ten stillbirths occurred in the vaccine group compared to just one stillbirth in placebo. Pfizer's trial also found a 0.3% rate of neonatal death in the vaccine group, 0.1% higher than the placebo group's postpartum hemorrhage and hypoxemic shock.

Pfizer reported the increase in preterm births was most pronounced in trial participants from upper-middle-income countries, notably South Africa, according to the Pfizer-sponsored The Lancet and Maternal Respiratory Syncytial Virus Clinical Trial (MATISSE) study.

While Pfizer claimed these numbers were not statistically significant, experts noted this numerical increase in preterm births mirrored the safety signal in the halted GSK trial, raising further questions about the risks of maternal RSV vaccination.

VRBPAC Chairwoman Hana El Sahly, during the May meeting, characterized the signal of increased preterm births during Pfizer's trial as "borderline significant" and said it was "probably" reason enough to pause the trial. She also said that she would like the Pfizer Phase 3 study to deliver data by the end of September 2022.

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Vaccine efficacy inconclusive, limited, with 'no direct benefit to the mothers'

Peter McCullough, M.D., MPH, in an April 21 Substack post, raised a different point about the viability of the Pfizer vaccine, arguing Pfizer's study design relied on an outcome that occurred too rarely to reliably measure efficacy.

Basing results on fewer than 2% of babies getting sick with the findings "a vaccine efficacy of 57% against severe RSV disease," McCullough presented meaningful protective vaccine measurements.

"Pfizer has aggressively advanced RCTs [randomized control trials] into the pregnant population with no assurances on long-term outcomes," McCullough added, with "no direct benefits to the mothers."

In the May VRBPAC meeting, it was further noted that while the incidence of RSV for babies was lower in the vaccine group up to 6 months of age, during the 6- to 180-day period after birth, babies in both groups contracted RSV at similar rates.

After the Centers for Disease Control and Prevention (CDC) recommended the vaccine for pregnant women in September, Bill Gates and Pfizer CEO Albert Bourla, "fascination of the mother for passive immunization of the infant is an unnecessary and risky strategy that will undermine the ability to boost or premature deliveries when deployed on a large scale."

This controversy comes at a time when the CDC is facing the largest rise in infant mortality in 20 years and amidst concerns that doctors are being paid to push vaccines on pregnant women.

Warnings felt on deaf ears

The recent RSV investigation was not its first warning about the RSV trials. On May 10, following Pfizer's publication in its Phase 3 trials data, The BMJ warned that the trials' safety signals were enough to ESPECIALLY warrant a halt to the trials.

Obenta Von The BMJ, "My interpretation of all these data is that there may be a safety signal for preterm births that should be followed up."

A scientist at the National Institutes of Health who wished to remain anonymous told The BMJ that Pfizer data should be investigated using more sensitive measures such as average birth weight and subgroup analyses to determine the validity of the safety signal.

On May 23, The BMJ reported on the safety concerns noted by several VRBPAC members at their May meeting.

Before the FDA discussed the Pfizer RSV vaccine in May, "Peter Gelfoy" from the U.K. posted a public comment to its website that said:

"It is remarkable that the FDA:

1. Do not have an abstraction or midwife on this VRBPAC committee.
2. Allowed these trials when, it seems, there were no safety trials of this vaccine in pregnant non-human primates.
3. Allowed these large trials in pregnant women when pregnant women had been excluded from previous RSV vaccine trials." Lastly, it has...
4. Allowed Pfizer's phase 2 trial that involved 3-5 serious blood clots for the 300 participants to proceed to phase 3 trials.
5. When notified in February 2022 by GSK of a significant safety signal for preterm births and neonatal deaths in a trial of a similar RSV vaccine, the FDA did not immediately halt Pfizer's safety trials, nor was Pfizer informed of the finding.
6. Authorized an Institutional Review Board – Advarra – that approved the Phase 3 trial in pregnant women. Advarra's informed consent form for the ongoing trial contains the advice "The risks associated with the study drug are unknown to the baby and to you." Advarra's form also says, "Joining your baby will not receive direct benefit from the study or placebo directly." According to the trial protocol, this wording was also approved by the FDA.
7. Allowed the Phase 3 trial to stay early, although this may have prevented the discovery of significant safety signals."

Gelfoy appended a document detailing further safety considerations in the Pfizer trials, where he also cited Dr. Eric Sirtalan, lead author of the Phase 3 study, who wrote in a different study, "The role of breast feeding in preventing RSV disease and hospitalization for RSV is unknown."

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John Michael Dumais is an editor for The Defender. He has been a writer and commentary reporter on a variety of issues, including the dead zone pits, health freedom and all things related to the COVID-19 pandemic.

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